OHIO TRAFFIC CRASH	REPORT	C	)H-1 (Rev. 1-82	<u>?)                                    </u>		***************************************
REPORT NO. 13-012	7 ☐ OH-2 Lebanon	Police	0 8 3 0 3 0 0	ODHS	USE ONLY - 00 NC	T MARK ABOVE
REPORT AT STATION NO OF VEH CRASH SEVERITY (CHECK MOST SEVERE)				COMBINED	OVER \$150	HIT SKIP SOLVED
IN COUNTY OF WARREN	LVED Z FATAL		PERTY DAMAGE O	NLY LOSS		UNSOLVED TIME: MILITARY
CRASH OCCURRED ON 1 A		BANON	WITHIN THE I	NTERSECTION OF	[   WK!)	112:30
IF NOT IN INTERSECTION	5, 99 STUB		INTERSECTING ST	REET, MILEPOST,	HOUSE NO.	CITY CODE
MILESFEE	T W S OF	FH'9 FILT				
	100 30%	1119 1101		ı		e film in it.
A UNIT NO OF OCCUR	ANTS OPERATING	PARKED DRIVER	RLESS HIT & BA	IN NON CONTAC	T INSURANCE CO OR AGENT	Process Course Benefit and Course Course of State of Course and Co
DRIVER-PEDESTRIAN NAME (LAS	I, FIRST, MI)	ADDRESS (I	NO., STREET, CITY	STATE, ZIP CODE)		
PHONE NO.	BIRTH DATE AGE 8	SEX SOCIAL SECUR	RITY NO.	STATE	DRIVER'S LICENSE	NO. OCCUPATION
OWNER (IF SAME AS DRIVER, WR	m y TE SAME)	ADDRESS				PHONE
	,					PRONE
VEH YR MAKE	MODEL	COLOR STYLE	STATE LICE	NSE PLATE NO.	TOWING SERV	VICE VEH/PED DIR
CIRCLE 2 3 DAMAGE	DAM DAM	IAGE SEVERITY	DAMAGE SCALE		ICLE DISPOSITION	FIRE FROM TO
AREAS 1	5 10 UNDER CAR 11 LOAD	NON-FUNCTIONAL  FUNCTIONAL	LIGHT	MODERATE L	DRIVEN AWAY REMAINED AT SCE	NO FIRE  NE FIRE DUE TO CRASH
UNIT NO OF	12 TRAILER OPERATING	DISABLING		NON-CONTACT	TOWED	OTHER FIRE
8 NO. 2 NO OF OCCUP		/M/ L	NO., STREET, CITY,	🗆	INSURANCE CO OR AGENT PE	RLESS INDEA
-	,					
PHONE NO.		SEX SOCIAL SECURI	TY NO.	STATE	DRIVER'S LICENSE	NO. OCCUPATION
OWNER (IF SAME AS DRIVER, WRITE		ADDRESS	\		OWINGS	PHONE
PRIME ENGIN	MODEL C	C. 300 K	EN BROK	N BLVK	) MILLS M	7 11 1 02 1
09   TOYOT	A	TK	MO 4	0913m1	3	FROM TO
CIRCLE DAMAGE AREAS		AGE SEVERITY NON-FUNCTIONAL	DAMAGE SCALE		DRIVEN AWAY	FIRE NO FIRE
		FUNCTIONAL DISABLING	Atight	HEAVY [	REMAINED AT SCEN	
C FROM NAME (LAST, FIRST,	MI)	BIR	THDATE AG	1	SITION	OTHER FIRE INJURIES
ADDRESS same		PHONE	SE	X A B C	D E F	A B C D E F
D. FROM NAME (LAST, FIRST, UNIT NO.	MI)	_	THDATE AC	iE		I FATAL 2 SERIOUS VISIBLE 3 MINOR VISIBLE
ADDRESS		PHONE	SE	X	ו ששו	3 MINOR VISIBLE 4 NO VISIBLE INJURY 5 NOT INJURED
E FROM NAME (LAST, FIRST,	MI)	BIR m I	THDATE AC	E .	8 7 A	CONDITION
O. ADDRESS		PHONE	SE	X	sin	I APPARENTLY NORMAL
FROM NAME (LAST, FIRST, NO.	MI)	Ĭ	THDATE AC	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		2 SICK 3 FATIGUED
ADDRESS		PHONE		X	TRAINTS	4 APPARENTLY ASLEEP 5 PHYSICAL DEFECT 8 OTHER CONDITION 7 UNKNOWN
A B C INJURED TAKE	ТО	Ву		A B C	0 E F	ALCOHOL
D E F A B C INJURED TAKEN TO By				INSTUSED	LABLE	YES B YES
W I D I C I CONTE IMEE				3 LAP BELT U	ISED DELT HOED	TESTED TESTED
D E F	LADOTO			A LADISHOLII	BELT USED	NO ALCOHOL DETECTED
D E F	HAGEDAND DESCRIPTION			A LADISHOLII	BELT USED ETY SEAT SED EPORTED	2 HBD ABILITY IMPAIRED 3- HBD ABILITY NOT IMPAIRED
D E F  A CHENSE  A CHENSE  ORC. CHENSE	HARGEDAND DESCRIPTION			4 LAP/SHOUL 6 SHOULDER 6 CHILD SAF 7 AIR BAG U: 8 USE NOT R	BELT USED ETY SEAT SED EPORTED	2 HBD ABILITY IMPAIRED 3- HBD ABILITY NOT IMPAIRED 4 HBD ABILITY UNKNOWN  DRUGS
D E F  A CHENSE  O CHENSE  O CHENSE  O CHENSE  O CHENSE  O DISPATCHED	ARRIVED CLEARED	OTHER TIME	TOTALMINUTE	4 LAP/SHOUL 6 SHOULDER 6 CHILD SAF 7 AIR BAG U: 8 USE NOT R EJE A B C	BELT USED ETY SEAT SED EPORTED	2 HBD ABILITY IMPAIRED 3- HBD ABILITY NOT IMPAIRED 4 HBD ABILITY UNKNOWN  DRUGS  TESTED 0 TESTED  YES YES
D E F  A COTENSE  O COTENSE  O COTENSE  O COTENSE  O COTENSE  O COTENSE	HARGEDANDLESCRIPTION	130,049	TOTAL MINUTE	4 LAP/SHOUL 6 SHOULDER 6 CHILD SAF 7 AIR BAG U: 8 USE NOT R EJE A B C	BELT USED FTY SEAT SED EPORTED  CTION  D E F A	2 HBD ABILITY IMPAIRED 3- HBD ABILITY NOT IMPAIRED 4 HBD ABILITY UNKNOWN  DRUGS  TESTED 0 TESTED